

			<h1 style="text-align: center;">AWARD/ MODIFICATION</h1>			3a. ISSUED BY:			
						3b. CFDA:			
1. INSTRUMENT TYPE:			2. AUTHORITY:			3c. DUNS NUMBER:			
4. AWARD NO.:			5. MODIFICATION NO.:		6. MODIFICATION TYPE:		7. PR NO.:		
							PAGE 1 of		
8. ACTIVITY/AGENCY PROPOSAL NO.:			9. RECIPIENT PROPOSAL NO.:		10. PROPOSAL DATE:		11. ACTIVITY TYPE:		
							12. PROGRAM TYPE:		
13. ISSUED TO 13a. ADDRESS:		13b. CAGE:		13c. EDI/EFT NUMBER:		14. REMITTANCE ADDRESS (IF DIFFERENT FROM BLOCK 13):			
13d. BUSINESS OFFICE CONTACT:									
13e. TELEPHONE NUMBER:		13f. EMAIL ADDRESS:							
15. RESEARCH TITLE AND/OR DESCRIPTION OF PROJECT AND/OR PROPOSAL TITLE:									
16. FUNDING			ACTIVITY/AGENCY SHARE		RECIPIENT SHARE		TOTAL		
PREVIOUSLY OBLIGATED:							17. CURRENT FUNDING PERIOD		
OBLIGATED BY THIS ACTION:							THROUGH		
TOTAL OBLIGATED ON AWARD:							18. PERIOD OF PERFORMANCE		
FUTURE FUNDING:							THROUGH		
GRANT TOTAL:									
19. ACCOUNTING AND APPROPRIATION DATA:									
20a. PRINCIPAL INVESTIGATOR/RECIPIENT TECHNICAL REPRESENTATIVE:				21. TECHNICAL REPRESENTATIVE 21a. NAME:				21b. CODE:	
				21c. ADDRESS:					
20b. TELEPHONE NUMBER:		20c. EMAIL ADDRESS:		21d. TELEPHONE NUMBER:			21e. EMAIL ADDRESS:		
22. AWARDOFFICE CONTACT 22a. NAME:			22b. CODE:		23a. ADMINISTRATIVE OFFICE:			23b. CODE:	
22c. ADDRESS:									
22d. TELEPHONE NUMBER:			22e. EMAIL ADDRESS:						
24. SUBMIT PAYMENT REQUEST TO:			25a. PAYING OFFICE:		25b. CODE:		26a. PATENT OFFICE:		
							26b. CODE:		

AWARD NO.		AWARD/MODIFICATION		MODIFICATION NO.		PAGE 2 of	
27. SPECIAL INSTRUCTIONS:							
28. DELEGATIONS: The administration duties listed below have been delegated to the administrative office (block 23a). Upon request the awarding office contact (block 22) will make their full text available. Please direct questions to the contacts @:							
29. TERMS AND CONDITIONS: The following terms and conditions are incorporated herein by reference with the same force and effect as if they were given in full text. Upon request the awarding office contact named in block 22 will make their full text available, or they can be found at the specified URL.							
DOCUMENT		URL				CLAUSES	
30. OPTIONS							
OPTION NO.		AMOUNT		PERIOD			
(1)							
(2)							
(3)							
(4)							
31. REPORTS: The following reports must be submitted to the indicated addressees, in the indicated quantities, within 90 days following the expiration or termination of the project. Final Technical Reports must have a SF298, Report Documentation Page, accompanying them. Unless otherwise stated in the award/modification, complete Block 12a of the SF298 as follows: "Approved for Public Release; distribution is Unlimited".							
ADDRESSEE			REPORT TYPE			COPIES	
32. FOR THE RECIPIENT				33. FOR THE UNITED STATES OF AMERICA			
32a. SIGNATURE OF PERSON AUTHORIZED TO SIGN				33a. SIGNATURE OF AWARDCING OFFICER			
				(b)(6)			
32b. NAME AND TITLE OF SIGNER		32c. DATE SIGNED		33b. NAME AND TITLE OF AWARD OFFICER		33c. DATE SIGNED	

FINANCIAL ACCOUNTING DATA SHEET - NAVY

1. CONTRACT NUMBER (CRITICAL)			2. SPIIN (CRITICAL)		3. MOD (CRITICAL)			4. PR NUMBER					PAGE 3 OF				
CLIN/SLIN	6. LINE OF ACCOUNTING												7. AMOUNT (CRITICAL)		NAVY INTERNAL USE ONLY REF DOC/ACRN		
	A. ACRN (CRITICAL)	B. APPROPRIATION (CRITICAL)	C. SUBHEAD (CRITICAL)	D. OBJ CLA	E. PARM	F. RFM	G. SA	H. AAA (CRITICAL)	I. IT	J. PAA	K. COST CODE						
											PROJ UNIT	MCC				PDLI & SUF	
												PAGE TOTAL					
												GRAND TOTAL					
PREPARED/AUTHORIZED BY:						COMPTROLLER APPROVAL:											
						FOR FISCAL DATA AND SIGNATURE											
DATE:						BY _____ for COMPTROLLER, ONR CONTRACT REVIEWED											
DATE:						DATE:											

FINANCIAL ACCOUNTING DATA SHEET – NON-NAVY DoD ACTIVITIES

1. CONTRACT NUMBER (CRITICAL)		2. SPIIN (CRITICAL)	3. MOD (CRITICAL)	4. PR NUMBER		PAGE 4 OF	
5. CLIN/SLIN	6. ACRN (CRITICAL)	7. ACCOUNTING CITATION			8. AMOUNT (CRITICAL)		NAVY INTERNAL USE ONLY REF DOC/ACRN
					PAGE TOTAL		
					GRAND TOTAL		
PREPARED/AUTHORIZED BY:				COMPTROLLER APPROVAL:			
				FOR FISCAL DATA AND SIGNATURE			
DATE:				BY _____ for COMPTROLLER, ONR CONTRACT REVIEWED			
				DATE:			

AWARD NO.	SPECIAL REQUIREMENTS	MODIFICATION NO.	PAGE 5 of